UCSF
Newsbreak

News for the UCSF Campus Community

VOL. 13, NO. 14 JULY 3, 1998

INSIDE

2 Elizabeth "Betty" Sooy dies

3 Debas reflects on year as Chancellor

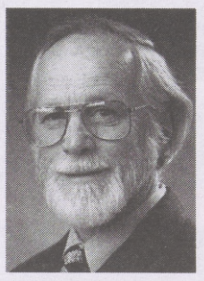
4-5 AIDS experts present latest findings at 12th World AIDS Conference

Chris T. Anderson

Peace, pomp & circumstance

Class of 1998 graduates of the UCSF School of Pharmacy, top photo from left, Cheryl Tran, Carrie Fu and Maria DeRisi show their spirit at the commencement ceremony held June 20 at the Nob Hill Masonic Auditorium. At the UCSF School of Dentistry commencement ceremony also on June 20, graduates, from left, Kriston Gallipeau, Douglas Hope and Aldrin Abad Adamos were among the dental class of 1998. For more graduation photos, see page 7.

A chancellor for the next century



Bishop

Nobel laureate J. Michael Bishop 61 began his role as UCSF's eighth chancellor on Wednesday. A 30-year member of the faculty, the famed researcher will likely lead the University into the next millennium. *Newsbreak* sent these questions to Bishop, who responded with these answers printed here in full.

Q: What are your top priorities as you enter the Chancellorship?

A: Maintain and enhance the excellence that UCSF has achieved in scholarship, teaching, health care and public service. Foster a community at UCSF that is both humane and diverse. Develop the new campus at Mission Bay in a way that will benefit all of our sites and missions. Be accessible and responsible.

Q: One of your first high-profile activities as Chancellor will be the groundbreaking of the new clinical cancer center. As a basic scientist known for the discovery of oncogenes, what are your thoughts on the progress made in treating this deadly constellation of diseases? Is a cure in sight?

A: The past 20 years have seen remarkable progress in our understanding of the genetic and cellular mechanisms that lead to cancer. But it is too early to expect this understanding to have produced major progress in the treatment of disease. There are promising avenues now in view, but we have just begun to travel those avenues, and we cannot be certain where they might lead. I suspect that progress against cancer will continue to be a matter of small steps, eventually summing up to effective prevention and treatment. I doubt that there can be a single "cure" for cancer, and I certainly do not expect to see anything of this sort in my lifetime. There is a lot of hard work yet to be done. My great hope is that we can eventually shift our emphasis to prevention of cancer — the definitive way to deal with this disease.

Q: Why is the Mission Bay campus important to the future of the University? Do you think UCSF's presence at Mission Bay will be a catalyst for the biotech industry in San Francisco?

A: Lack of adequate space has long vexed our ability to perform cutting edge research, instruction and health care. We have been limited in our ability to launch new initiatives and to deploy new technologies. Even our most successful programs are threatened by deteriorating and inadequate facilities. The Mission Bay campus is our only present hope for overcoming these constraints.

We have made a special effort to initiate the Mission Bay development with premier research groups. We expect that these will make the neighborhood an attractive site for biotechnology companies, assuming that the industry remains expansionary and in need of new facilities.

(See **Chancellor** on page 3)

Physicians conduct first US-China Web consultation

By RUTHANN RICHTER

Two distant worlds converged for a few hours on a computer screen last Thursday evening, with doctors from western China clearly visible in one quadrant and UCSF Stanford Health Care physicians in another.

Using relatively simple Internet technology, the two teams of doctors 6,500 miles apart were able to view each other, share notes, data, CT scans and X-rays, and carry on clear conversations about two very sick Chinese youngsters.

The June 25 demonstration was the first-ever live medical consultation between the United States and China over the Internet. US Secretary of State Madeleine Albright called it an "impressive set-up and achievement."

In the demonstration, four UCSF Stanford pediatricians consulted with doctors at Xian Medical University on two difficult cases: a newborn with potentially severe brain damage and a 12-year-old girl with apparent heart inflammation. Doctors on both sides sat behind computer workstations, talking to each other via two-way interactive video and writing notes back and forth on a "whiteboard" on their 21-inch computer screens.

The link-up was demonstrated for the benefit of a large contingent of US and Chinese diplomats and was timed to coincide with President Bill Clinton's visit to China. Albright, who sat in on the demonstration in Xian along with a dozen other administration and congressional officials, described it as "an example of how individuals can cooperate to benefit real people in real time."

She asked neonatologist David Stevenson, who practices with Lucile Packard Children's Services and holds the Faber Professorship in Pediatrics at Stanford, whether he thought there were any limits to the technology.

"There are obviously limits to any technology," responded Stevenson, who was seated in front of a Sun workstation in the Packard Children's board room. "We would depend on our colleagues, who can look at and touch these patients, but there is much that we can do. Our colleagues can be our eyes and ears,

(See **China** on page 6)

Cancer center groundbreaking ceremony on Tuesday

By ABBY SINNOTT

A long-awaited clinical cancer center needed to help accommodate patient growth and further the collaboration of the cancer research and clinical efforts will break ground at UCSF on Tuesday, July 7. The campus community is invited to attend a 4 p.m. ceremony at the construction site.

The five-story, 88,000-square-foot building is being built at the corner of Sutter and Divisadero streets in San Francisco and will house the clinical cancer programs of UCSF Stanford Health Care. Included in the building will be a state-of-the-art radiation therapy center; a patient-oriented breast care center that will include diagnostic and cancer risk evaluation services; and integrated programs for melanoma, prostate, lung, gynecological cancers and others. The facility will also have an infusion center for chemotherapy, as well as doctors' offices and will offer overhead walkway access to the UCSF/Mount Zion Medical Center, a 439-bed facility.

The building is scheduled for completion in 1999 and has a total project cost of $42.5 million, including $10 million to be obtained through private fund-raising. Bond financing for the new facility is part of a $338.4 million capital construction and debt restructuring bond package for UCSF Stanford Health Care.

The new facility will function as a clinical complement to the cancer research building that opened its doors at UCSF/Mount Zion in 1997. The synergy and collaboration of this arrangement is a hallmark of UCSF's cancer programs. While basic scientists explore cancer's most fundamental causes, clinical researchers are exploring ways this knowledge can be applied, providing patients with access to the latest experimental protocols.

"UCSF has a strong combination of basic scientists and clinical scientists working together, which is quite unique compared to other centers in the country," says Frank McCormick, director of the UCSF Cancer Center and Cancer Research Institute. "The new building will help to develop a structure that encourages dialogue between lab and clinical scientists and therefore encourages translation of lab research into new therapies."

In addition to allowing for the expansion of new and existing programs, the clinical cancer building will also accommodate the UCSF Cancer Center's remarkable patient volume growth. During the last year, it is estimated that the oncology programs located at UCSF/Mount Zion Medical Center received 30,127 patient visits. By the year 2000, the clinical programs are expected to increase by at least 6,000 visits.

"This new building will allow us to offer multidisciplinary care as well as increase patients' access to new and novel therapies that are beneficial for the palliation and cure of cancer," says Alan Glassberg, associate director for clinical care of the UCSF Cancer Center.

One of the goals of the UCSF Cancer Center is to become the first National Cancer Institute (NCI)-designated cancer center in Northern California. UCSF is submitting its grant application this October; such a designation will bring

(See **Cancer** on page 8)

Mount Zion Auxiliary installs new board

The UCSF/Mount Zion Auxiliary recently inaugurated its board of directors for 1998-99 at the group's annual meeting and installation dinner ceremony on June 15 at the World Trade Club in San Francisco.

Cathryn Sampson Hilliard, a six-year UCSF/Mount Zion Auxiliary volunteer and past first vice president, is the group's new president.

"Cathryn's heart is as big as her amazing aptitude for business," says Karen Wener, the Auxiliary's immediate past president. "She has a passion for the Auxiliary's projects and her perception of the group's future is consistent with our mission."

Hilliard is currently the administrator for the Construction Industry Force Account Council, a non-profit watchdog organization for local construction projects. She has also worked for both houses of the US Congress and during the last ten years served as the director of government and public affairs for the Association of Bay Area Governments.

"The UCSF/Mount Zion Auxiliary is a wonderful group of giving and caring people. Their mission is to assist patients who are going through the healing or post-surgery period and the money they raise pays for articles, equipment and projects for patients that would otherwise be unavailable," Hilliard says.

The Auxiliary's current project is developing a new boutique that will sell a complete line of merchandise for cancer patients, such as wigs and patient literature. Currently, the boutique is under construction at the UCSF clinical cancer building at UCSC/Mount Zion, part of UCSF Stanford Health Care. The Auxiliary recently hired a manager for the boutique who will be an employee of the UCSF/Mount Zion Auxiliary.

The UCSF/Mount Zion Auxiliary broke all financial records in 1997-98, raising a total of $492,400. A total of $268,395 was allocated to various UCSF/Mount Zion projects and departments including the Cancer Center Patient Navigator Program, individual social service grants to patients, educational equipment for the pediatrics department, and psychosocial support groups in the oncology program. The department of medicine received $25,000 and the Diabetes Program $50,000 from the Auxiliary. A total of $224,004 in Auxiliary funds remains available for future allocation.

The Auxiliary's new board of directors for 1998-99 includes Berit Muh, first vice president; Rachel Leader, memberships vice president; Earlene McMenamy, administrative vice president; Odile Gershow, treasurer; Tanya Goodman, secretary; and Karen Wener, immediate past president. The group's new directors include Carolyn Bloom, Linda Bradley, Kathleen Clark, Diana Drury Curtiss, Karen Fry, Kate Kardos-Polevoi, Gerri Miller, and Sally Scholz.

Private Support

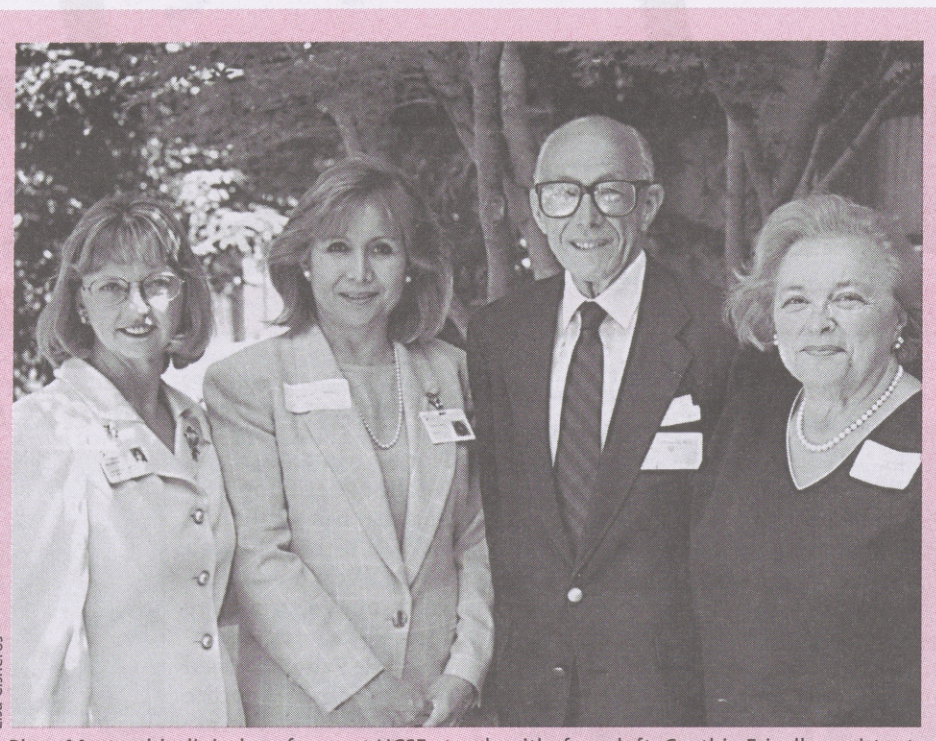
UCSF is pleased to acknowledge the following gifts/pledges of $25,000 or more from individuals, corporations and foundations received June 7-20, 1998.

$1,000,000 or more
Howard Hughes Medical Institute

$250,000 -$499,999
Helene Fuld Health Trust
Estate of George Wood '24

$100,000 - $249,999
Charles E. Culpeper Foundation

$25,000 - $99,999
Bank of America - Giannini Foundation
Boston Scientific Corporation
Janssen Pharmaceutica, Inc.



Lisa Cisneros

Piero Mustacchi, clinical professor at UCSF, stands with, from left, Cynthia Frizelle, assistant director of admissions, Myriam Cabello, director of registration, and Ilse Steinbach, auxiliary board member, at the annual meeting of the Hospitals Auxiliary. Mustacchi donated money at the request of his late wife, Dora, a longtime Auxiliary member, for the renovation of the admissions and registration unit at the UCSF Medical Center.

Making life more pleasant for patients

At the annual meeting of the Hospitals Auxiliary of the UCSF Medical Center on June 17, Jacqueline Kuhn, president for 1998-99, welcomed new members to its board of directors.

Among those joining the board are Kim Debas, wife of Haile Debas, dean of the UCSF School of Medicine, and Helen Ripple, former director of nursing at the UCSF Medical Center, part of UCSF Stanford Health Care. Other additions to the board are Dorothy Duffy Price, and Katheryn Bishop, wife of Chancellor Mike Bishop. The Auxiliary's new slate of officers, approved by the board, includes Kuhn as president, Carolyn Beltzer, Nancy Douglass and Danette Magilligan as vice presidents, and Leona Hansen Biddle as secretary. A treasurer has yet to be named.

Rod Seegar, hospital chaplain, was honored as a lifetime member of the Auxiliary at the annual meeting held in the Faculty Alumni House.

Jean Poupard, chair of the Special Projects Committee, announced that the Auxiliary will donate funds to ten projects selected from a list of 35 requests submitted by Medical Center departments on behalf of their patients.

"We received well over $100,000 in requests for special projects," Poupard says. "We wish we could fill all the requests but we can only do what we can."

The lion's share of the funds, $8,000, will go to refurbish the admissions and registration unit at Moffitt Hospital. A tribute to Dora Mustacchi, a longtime Auxiliary member who died recently, the project will be completed in partnership with hospital administration.

Other items to be financed with funds raised by the Auxiliary are wall and ceiling murals for the Ambulatory Surgery Center pediatric operating room; car seats, strollers and carriers for the Healthy Baby Incentive Program; and small gifts that Volunteer Services passes out to both inpatients and outpatients during the holidays.

Elizabeth "Betty" Sooy dies

Elizabeth "Betty" T. Sooy, wife of the late UCSF Chancellor Francis A. Sooy and recipient of the UCSF Medal for her own public service efforts, died Saturday at her home in San Francisco. She was 76.

During the nearly ten years that her husband served as UCSF's fourth chancellor, Sooy was involved in a myriad of activities and organizations, including the Hospitals Auxiliary and the Faculty Wives Association. Sooy was a supporter of the Achievement Rewards for College Scientists, which recognized young scholars at UCSF. She also is credited for her tireless advocacy efforts for children's programs in San Francisco and helping to raise funds for the opening of the Marilyn Reed Lucia Child Care Center at UCSF, where the playground bears her name on a plaque.

"We named the playground after her because she was a great lobbyist for the child care center," says Marilyn Reed Lucia, clinical professor of psychiatry. "She was very instrumental in getting this whole thing going and getting the stamp of approval from the chancellor."

Sooy was honored for more than 45 years of service to the community when she received the UCSF Medal — the highest campus honor — at the Founders Day banquet on April 4, 1985. The award recognizes individuals from the community for contributions to health education, health care and public service.

"She spent so much of her life at UC," says her daughter, Adrian, who works as an assistant to Bob Obana, assistant vice chancellor of finance at UCSF. "A lot of it was spent behind the scenes as the wife of the chancellor. She had a big role that wasn't necessarily visible, but was nevertheless invaluable."

A native of Little Rock, Arkansas, Sooy attended Washington University, where she met her husband-to-be while he was doing a residency. They wed in April 1944 and were married for 42 years before the former chancellor died in a plane crash on Sept. 12, 1986, four years after he resigned from the chancellorship to devote more time to his teaching and medical practice.

Private services were held at the Glenville Cemetery outside Bakersfield, where her husband is buried. A memorial service was held on June 30 at the Episcopal Church of St. Mary the Virgin. Contributions in Sooy's honor may be made to the UCSF Foundation for the benefit of the UCSF child care centers.

She is survived by five children, Dan, Jane Anne, Elizabeth, Frances and Adrian and two grandchildren, Amanda and Danie Ross Sooy.

Sooy

UC Regents elect Davies as chair

John G. Davies, a San Diego attorney who has been a member of the UC Board of Regents for six years, has been elected by his colleagues to chair the University's governing board.

The Regents unanimously selected Davies to be chair of the 26-member board. They also named Frank W. Clark Jr., a Los Angeles attorney, to the position of vice chairman. Both will serve one-year terms.

Davies, 63, currently is Gov. Pete Wilson's judicial appointments secretary. He also serves as counsel in the law firm of Allen, Matkins, Leck, Gamble & Mallory in San Diego. He holds degrees from the University of Southern California and the Boalt Hall School of Law at UC Berkeley.

A San Diego native, Davies has served as member and chairman of the San Diego Planning Commission and as director and president of the Centre City Development Corporation in San Diego.

Davies was appointed to the Board of Regents by Gov. Wilson in 1992 and his term on the board runs until 2004. He most recently chaired the board's Committee on Health Services.

The board also selected the following Regents to chair the board's standing committees for the year: Tom Sayles (Audit); Ward Connerly (Educational Policy); S. Sue Johnson (Finance); David S. Lee (Grounds and Buildings); Meredith J. Khachigian (Health Services); Gerald L. Parsky (Investments); and Peter Preuss (Oversight of the Department of Energy Laboratories).

Corrections

The last issue of *Newsbreak* quoted Haile Debas, dean of the School of Medicine, saying that the numbers of underrepresented minorities expected to enroll in 1998 "are actually better than two years ago." The numbers on which Debas based this statement were incorrect. The pool of underrepresented minorities, the number of them offered admission to the medical school and the number of students who accepted the offer of admission are all down from two years ago, according to the UCSF School of Medicine.

In the last issue of *Newsbreak*, a brief about the General Internal Medicine Practices at UCSF should have said that the practices are expanding to a new site at 1701 Divisadero St., fifth floor, across the street from the UCSF/Mount Zion Medical Center. Beginning July 6, general medicine physicians David Campa, Christine Ho, Dan Null and Mike Rabow are moving to the new location. The other general internal medicine practices will remain at 400 Parnassus Ave.

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Debas ends historic reign as chancellor

Haile Debas in his usual humble manner credits timing, history and a supportive staff and faculty for his eventful and successful tenure as UCSF's seventh chancellor.

He stepped in a little more than a year ago as the campus was about to make two of its most important decisions ever — the UCSF Stanford merger and selection of a new research site. As a bonus, one of UCSF's scientists — Stanley Prusiner — won a Nobel Prize during his term.

Debas

But Debas — the Dean of the School of Medicine, who was pressed into higher service when former Chancellor Joseph Martin accepted a post at Harvard — has been more than an able pinch-hitter. He has been, and will continue to be, a major force in shaping UCSF's future.

"He has responded unselfishly to UCSF's need for leadership during the past year, a year in which he oversaw the completion of the historic UCSF Stanford merger and planning for the expansion of the campus to Mission Bay, among other issues of importance to the campus and community — all of which he addressed with consummate skill and great care, always mindful of the special mission of the University's only campus dedicated to the health sciences," stated a resolution passed by the UC Regents who honored Debas at their June meeting.

Debas' term as Chancellor ended Tuesday, but he will continue full-time duties as medical school dean and Vice Chancellor, Medical Affairs.

Looking back at his more than busy term as Chancellor, Debas acknowledges that the merger and Mission Bay took up most of his energy. "Two years ago, we did not know how the Medical Center could survive," he says. "Now, we have a very strong enterprise. We have an opportunity to revolutionize and redefine the role of the academic medical center, and do it in a way that is sensitive to our patients."

He admits there have been and will continue to be some merger-related growing pains, but "it is going amazingly well considering its complexities."

"We're only on the one-yard line, with 99 yards to go for a touchdown. But the future is very bright," says Debas.

Mission Bay "gives us a new lease on life," he says. "We have a great opportunity to revitalize all of UCSF."

Because the merger and Mission Bay occupied most of his time, Debas did not devote as much attention as he would have liked to a project dear to his heart — improving the quality of campus life. "I've always said that this is not just a place of curing, but also caring." And to continue that role, the campus must address how we care for each other as students, teachers and co-workers, he says.

As a dean and vice chancellor he intends to help carry out some of the goals implemented while Chancellor to improve campus life. "My major focus is to make this a good place to work and study. To make this a quality place where we respect each other." The campus administration, for example, is putting into place new problem resolution and supportive work environment programs.

Another pet project, he says, is to create a campus center. Because it has had to crowd offices and laboratories at Parnassus, UCSF for decades has not had a real hub for campus activities.

A planned campus center at Mission Bay could provide a "new heart" not just for that site, but for the entire UCSF community, says an optimistic Debas, who prefers to look forward rather than at the past.

—Andy Evangelista

Photos by Karen Preuss

Leaders of today and tomorrow

Sylvia Fernandez Villarreal, top right, UCSF clinical professor of pediatrics, has been elected by the medical staff to serve a two-year term as chief of staff at San Francisco General Hospital, where she directs the pediatric inpatient unit and the Kempe Clinic for teen mothers, high-risk children and their families.

Villarreal, who earned her medical degree from Stanford Medical School in 1977, succeeds Robert Mackersie,top left, UCSF professor of surgery and director of the Trauma Service at SFGH. The two acknowledged the change of leadership at the annual medical staff dinner on June 17.

Also that evening, eight interns were named 1998 recipients of the Julius R. Krevans Prize for Clinical Excellence for their outstanding patient care and professional conduct.

Named for the former UCSF chancellor, the award was established in 1979 by the Gladstone Institute of Cardiovascular Disease. This year's recipients are above from left, physicians Ann Fleming, psychiatry; Roman Sydorak, surgery; Dan Delgado, pediatrics; Fernando Velayos, medicine; Jody Steinauer, obstetrics/gynecology; and Mary-Beth Humphrey, medicine. Not pictured are Jonathan H. Lee, family and community medicine; and Evelyn Cumberbatch, psychiatry.

Chancellor (from page 1)

Q: How will you work to ensure UCSF Stanford Health Care stays true to its promises to support the academic mission of the University? Is it important for UCSF to distinguish itself from UCSF Stanford Health Care? Why or why not?

A: I will serve on the board of directors of UCSF Stanford Health Care, where I intend to be vigilant for and oppose policies that might be inimical to our academic mission. I will have potent allies, including Haile Debas, dean of the School of Medicine and former chancellor of UCSF, and our faculty representative, currently Lee Goldman, chair of the department of medicine, who also sits on the board, to share my concerns. In addition, the academic representatives from Stanford share our ethos and objectives. I believe that UCSF Stanford Health Care has admirable motives and will not betray our trust.

There is no more reason to "distinguish" UCSF Stanford Health Care from UCSF than there is to distinguish Long and Moffitt Hospitals from UCSF. "They are we," as Dean Debas is fond of saying. I acknowledge that there is a potential for confusion among philanthropic donors, but we should be able to address this problem with diligent education.

Q: Other UCSF researchers have gone to work for the private sector to pursue their projects. Why have you chosen to remain at the University?

A: I love every facet of the academic mission and could not imagine myself removed from that mission. In particular, work in the private sector rarely involves teaching, and I have a life-long romance with teaching that I hope to sustain even in my role as chancellor.

Q: Chancellor Haile Debas has been a champion of campus life issues for faculty, staff and students, such as addressing student housing and supporting domestic partner benefits. Other areas that still need support are the campuswide activities to encourage diversity and to ensure gender equity in faculty and staff promotions. What are your thoughts on these two issues?

A: Haile Debas has been a strong advocate of diversity and gender equity at UCSF and I will continue that advocacy. The principal tactic for UCSF to achieve and sustain these objectives among our academic community is recruitment. We must identify outstanding candidates for students and faculty among diverse populations and then do our best to bring them here. This has always been the UCSF way—it has been relatively successful for professional students, less so with graduate students and faculty. We need to work harder on our deficiencies. I am pleased to note that recent years have seen vigorous new initiatives at UCSF addressed to these deficiencies, spearheaded by the Chancellor's Committee on Diversity, the Chancellor's Advisory Committee on the Status of Women and Associate Vice Chancellor and Dean Cliff Attkisson. I will support these efforts vigorously, and I will be open to additional innovative measures as well.

Q: The revitalization plan for Parnassus is very important to researchers who will stay behind while others go off to Mission Bay. How do you think Parnassus should be reconfigured to foster a new research renaissance?

Q&A

A: I hope to see Parnassus Heights developed into the world's finest institution for research on human disease, with programs ranging from the most fundamental exploration of pathogenesis to trials of the most advanced forms of prevention and treatment. This will set Parnassus Heights apart from Mission Bay on the one hand, but make the two sites complementary to each other. But I must also emphasize that the academic plan for Parnassus Heights will come from the faculty, just as has happened for Mission Bay. In the final analysis, the most reliable means by which to assure success is to let the faculty do the planning. This should not be a top-down exercise.

Q: Do you have any notion on how to bridge the University's multiple sites to build a sense of community?

A: We must first see to it that each site is successful in its own right: Nothing fosters community better than a sense of purpose and fulfillment. Beyond that, we will attempt to make the sites complementary rather than duplicative, generating a natural interdependence. This is more easily said than done and is certainly one of the largest challenges facing me and my colleagues in the UCSF leadership.

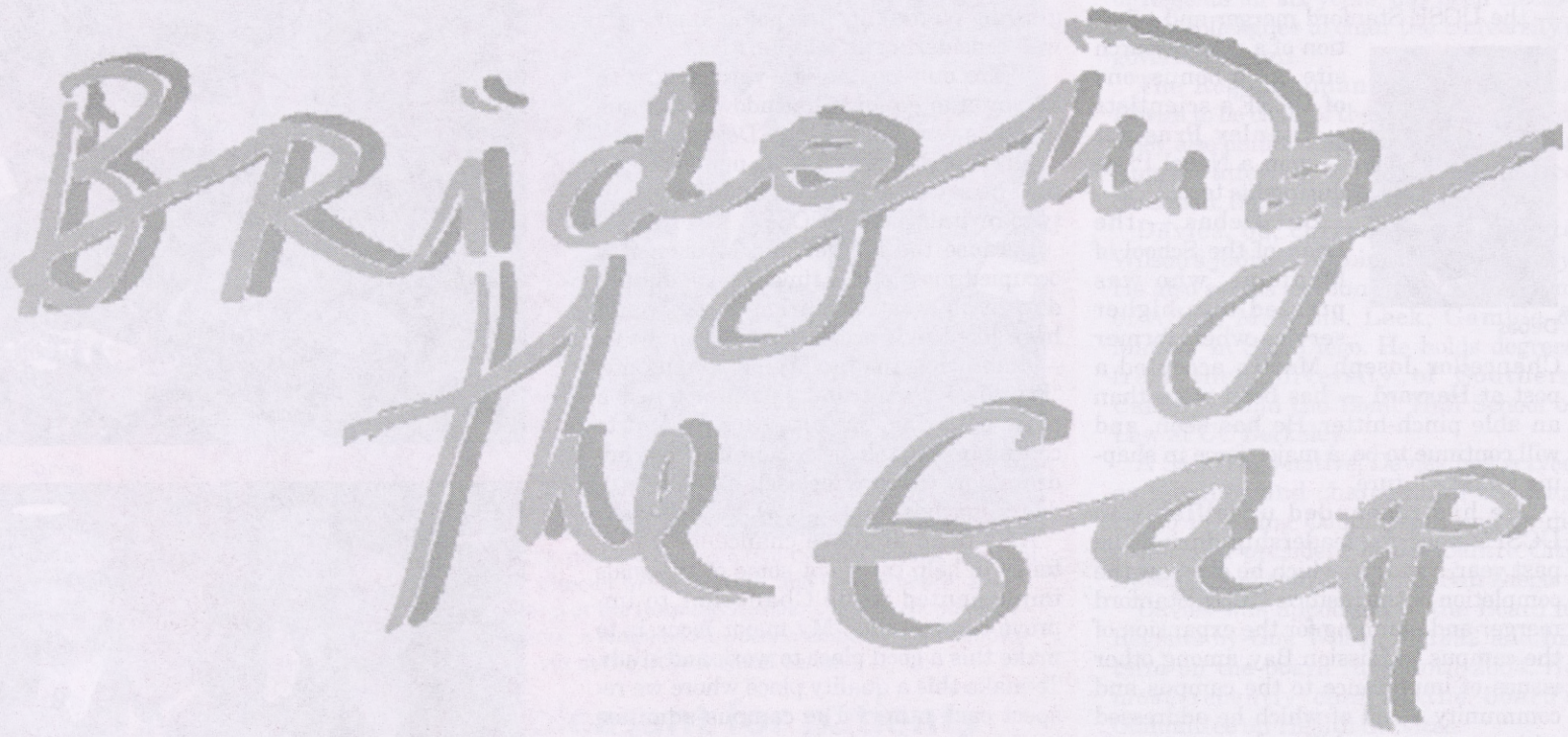
Q: Chancellor Joseph Martin kept the campus community current with news and issues by sending his email messages and hosting town hall meetings. How will you communicate to the campus community?

A: I will use the devices implemented by previous chancellors. I also have several other measures in mind, including open office hours for students and postdoctoral fellows, and informal discussion groups with faculty and staff. I would like every employee of UCSF to believe that they are serving a useful purpose for society and to feel fulfilled by their work.

Q: With the growing trend toward managed care, how do you think UCSF's educational programs should adapt to meet the needs of an industry constantly in flux?

A: I believe that we have already taken a large step in the right direction by forming UCSF Stanford Health Care. If all goes according to plan, our collaboration with Stanford will keep us competitive in the health care market, maintain our patient base for instruction and research, and instruct students in the evolving approaches in health care. But our faculty must also adjust to the times — professional students learn mainly by example and that example comes from individual interactions in the classroom and at the bedside. The same can be said of graduate education in research. Here again an entire field of human endeavor is in great flux, with changing aspirations among students, diversifying opportunities for employment and dizzying progress in research — the inattentive scientist can easily become outmoded within the span of a few years. Our students will learn how to cope with these instabilities largely from the example of their faculty. I do not believe organizational structures offer many solutions to challenges like these. The solutions lie with the ingenuity and diligence of individual faculty and students.

12th World AIDS Conference



Poised to answer a new generation of questions

The 1996 International Conference on AIDS in Vancouver was an important turning point in the epidemic. Great strides had been taken in understanding how HIV enters, replicates, and does damage to the human immune system.

Quite importantly, clinical trial data regarding a new class of anti-HIV drugs, protease inhibitors, were presented. When used in combination with other classes of anti-HIV medications, these drugs could apparently control the replication of HIV to an unparalleled degree. New diagnostic strategies made it possible not only to detect antibodies to HIV, but to detect the amount of virus in the blood and to tailor regimens on the basis of early warning signs that the virus was becoming activated.

Coates

Some scientists were talking about "cure" of HIV, as well as "viral eradication." The mood was ecstatic and optimistic.

At the 1998 International Conference on AIDS in Geneva, Switzerland, we heard from experts what has happened over the two years since Vancouver. Clearly, combination therapy is in widespread use in the US and is available to every HIV-infected person in San Francisco who wants to use it. Interestingly, though, random population-based studies of gay men in four US cities found that only about half of the gay men infected with HIV in these cities are using combination therapy. Importantly, researchers found that there were no economic or racial differences in use of combination therapy. The same cannot be said for the homeless or for injection drug users, we learned.

Has combination therapy met expectations? In many ways, the answer is "yes." People are living longer and better lives because of protease inhibitors and combination therapy. Deaths due to AIDS have dropped, new AIDS cases have declined precipitously, and individuals with HIV and AIDS are experiencing fewer opportunistic infections and better quality of life. One indicator of success is the decline in the number of obituaries in the mainstream and gay newspapers. Clearly, science has paid off. Better understanding of the virus, how to diagnose its activity, and how to block its replication have helped many people experience great benefit.

Have we achieved as much as we need to achieve? Have we "cured" HIV? The answer clearly is "no." Presentations by UCSF scientists at the AIDS conference in Geneva addressed both the successes we have achieved, the problems that are being encountered, and the scientific directions we hope to pursue to continue our mission of understanding, preventing and treating HIV.

One of the vexing problems that UCSF investigators have documented is the transmission of a strain of HIV that is resistant to protease inhibitors. This discovery came about as a result of a unique collaboration between investigators at the SFGH AIDS Program Options Project, the Gladstone Institute of Virology and Immunology, ViroLogic, and the Centers for Disease Control and Prevention. While these study findings will not be published in the *New England Journal of Medicine* until mid-July, the researchers were able to first present their findings in Geneva.

We also heard from the Geneva AIDS meetings how the epidemic is out of control in most of the developing world. This is not a surprise, according to an analysis of funding patterns for HIV in the developing world conducted by AIDS Policy Research Center Director Steve Morin, who is also an associate professor of medicine at UCSF.

And while we have made great strides in understanding more about how to prevent the transmission of HIV, especially in the developing world, donor agencies, to date, have been reluctant to use precious HIV prevention dollars to support counseling and testing services in the developing world. As a result, most individuals in areas where HIV is rampant are unable even to find out whether or not they are infected with HIV.

We are fortunate here in San Francisco to have some of the world's best clinicians, scientists, and prevention researchers and practitioners. Despite our challenges, we are poised to answer the new generation of questions posed by the epidemic and to put those answers into practice quickly here and elsewhere.

For the latest updates on AIDS, be sure to check out HIV InSite at (http://hivinsite.ucsf.edu/).

— Tom Coates, director of the AIDS Research Institute and director of the UCSF Center for AIDS Prevention Studies.

Despite our challenges, we are poised to answer the new generation of questions posed by the epidemic and to put those answers into practice quickly here and elsewhere.

Geneva follow-up forum

UCSF will host a follow-up forum to present the main findings reported at the 12th International Conference on AIDS in Geneva, Switzerland, on Wednesday, July 22, from 2 to 5 p.m. in Cole Hall. Speakers will include AIDS experts Jay Levy, Paul Volberding and others.

in Geneva

AIDS experts present latest findings at world conference

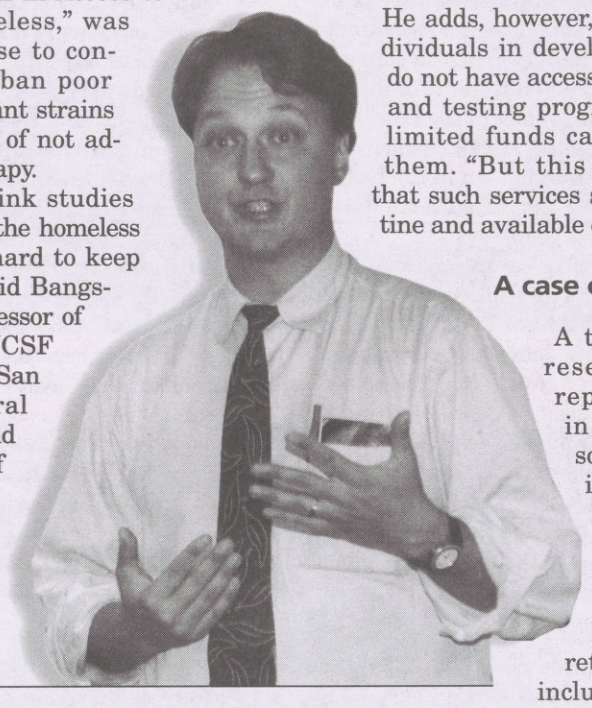
UCSF AIDS researchers presented their findings recently at the 12th World AIDS Conference in Geneva, Switzerland. Here is a brief synopsis of some of the findings.

HIV and the poor

In the first large-scale study of HIV treatment among the urban poor, researchers have found that very few of the HIV-infected poor receive drugs to combat HIV.

The research project, called the REACH study for "Research in Access to Care in the Homeless," was started in response to concerns that the urban poor may develop resistant strains of HIV as a result of not adhering to their therapy.

"Most people think studies can't be done with the homeless because they are hard to keep track of," says David Bangsberg, assistant professor of medicine at the UCSF AIDS Program at San Francisco General Hospital. "We found that to be untrue. Of 153 people in the study, we know where 151 of them are now, after more than a year."



David Bangsberg

The UCSF team identified participants for the research project in free food lines, homeless shelters and low-income hotels and tested them for HIV infection.

The UCSF team looked at how many of these people who were HIV-infected received therapy, how well they adhered to their regimens, and how the virus responded. Of those who do take anti-retroviral drugs, the researchers found a range of how well the patients adhered to their drug-taking regimens, ranging from 24 to 100 percent of prescribed levels. If subjects missed more than 10 percent of their drugs, the HIV treatment became ineffective.

Mystery of immunity

Researchers find that people repeatedly exposed to HIV but not infected may have some kind of immune protection that allows their cells to resist invasion by the virus. While this protection factor remains a mystery, researchers think it may be suppression of the virus by the immune system, triggered by prior exposures.

"We're guessing that a low-dose exposure to HIV induces a form of cellular immunity in some people," says Sharon Stranford, postdoctoral researcher. "Repeated exposures may provide a boost to the immune system without infecting the cells, like a natural vaccine."

If this type of response could occur early, before systemic infection, she speculated that this might be the process of protection in high-risk, uninfected people.

The developing world

HIV counseling and testing programs are very effective and relatively inexpensive ways for developing countries to curb sexual risk behaviors that can lead to HIV infection, researchers say.

"We designed a study to definitively answer whether it is cost effective to invest in these services in the developing world, and the simple answer is 'yes,'" says Thomas J. Coates, director of the UCSF AIDS Research Institute.

He adds, however, that most individuals in developing nations do not have access to counseling and testing programs because limited funds cannot support them. "But this study shows that such services should be routine and available everywhere."

A case of resistance

A team of AIDS researchers has reported a case in which a person has become infected with HIV that is resistant to six of the 11 approved HIV antiretroviral drugs, including protease inhibitors.

The investigators are from the UCSF AIDS Research Institute, ViroLogic Inc., and the Centers for Disease Control and Prevention.

The transmission of protease inhibitor resistant strains of HIV to a previously uninfected person could represent an emerging clinical and public health problem because protease inhibitors are a powerful weapon in the arsenal against HIV, says Frederick Hecht, assistant clinical professor of medicine at SFGH.

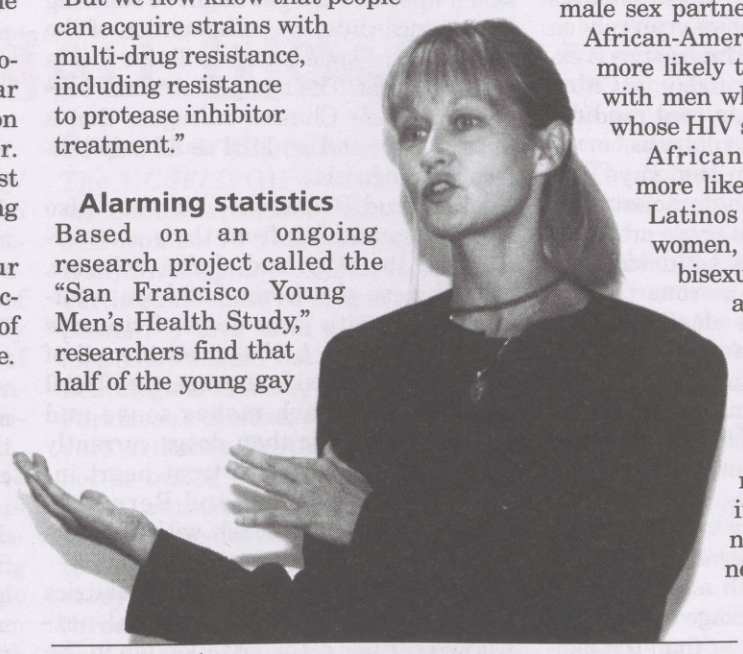
The multi-drug resistant HIV strain is believed to have been transmitted from one person to another through unprotected anal intercourse.

Multiple mutations of HIV are required for the virus to become resistant to protease inhibitors, according to Hecht, and it had been thought that those mutations might make it more difficult for the virus to reproduce and make transmission between people less likely.

"We still don't know how frequently resistant strains are transmitted," he says. "But we now know that people can acquire strains with multi-drug resistance, including resistance to protease inhibitor treatment."

Alarming statistics

Based on an ongoing research project called the "San Francisco Young Men's Health Study," researchers find that half of the young gay men who participated in a UCSF study were engaging in high-risk sex activities, many with a partner of differing or unknown HIV status.



Maria Ekstrand

Research findings showed unprotected anal intercourse among young gay men has increased by 50 percent since 1992, says Maria Ekstrand, a Center for AIDS Prevention Studies research scientist.

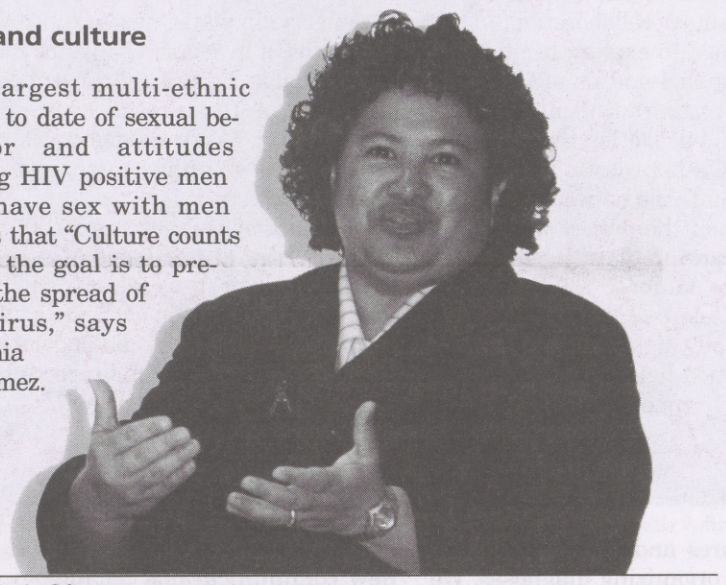
Dennis Osmond, UCSF associate professor of epidemiology and biostatistics, reports that this increased risk behavior has not yet led to increased rates of infection. The rates are high enough, however, to lead to substantial numbers of infected gay men as they get older.

As part of this project, Ekstrand, Osmond, and their colleagues annually surveyed 510 gay or bisexual men from 1992-97.

"We found these increases very alarming," Ekstrand says. "We didn't start out looking for this. Usually when a group of men is followed over time their risk goes down, because the questionnaire itself is an intervention, causing the respondents to reflect on their sexual behavior on a regular basis."

Sex and culture

The largest multi-ethnic study to date of sexual behavior and attitudes among HIV positive men who have sex with men shows that "Culture counts when the goal is to prevent the spread of the virus," says Cynthia A. Gómez.



Cynthia A. Gómez

An assistant professor of medicine at CAPS, Gómez and colleagues asked study participants to recall encounters that involved unprotected sex in the past three months and in the past year.

Gómez found that based on reports of the previous year, most sex behavior that might spread HIV did not differ significantly between African-Americans, whites and Latinos. But whites, for example, most often identified themselves as gay and reported a larger number of male sex partners than did Latinos and African-Americans. Whites also were more likely to have oral insertive sex with men who were HIV negative or whose HIV status was unknown.

African-American men were more likely than either whites or Latinos to also report sex with women, to identify themselves as bisexual, and to be uncomfortable with their same-sex behavior. When recalling encounters within the past three months, African-Americans and Latinos reported higher rates of unprotected anal intercourse with a partner whose HIV status was negative or unknown.

We're guessing that a low-dose exposure to HIV induces a form of cellular immunity in some people.

State digital library gets funding boost

The University of California will make it easier for the public to gather facts about fires, floods, earthquakes and other important environmental events and issues by digitizing selected materials held in its academic libraries and putting them on the Web for all the world to share.

The project was funded by a $198,000 federal grant to the California State Library. It is one of the first in UC's effort to build the California Digital Library, a dream of UC President Richard C. Atkinson, who calls it the University's "library without walls."

Launched last October, the California Digital Library will eventually blend major portions of the electronic and print holdings of UC's 29-million-volume collection to make it accessible by desktop or laptop computer.

The environmental project also marks the first collaborative effort with the state library to build the Library of California, a digitally constructed library that could eventually link all of the state's public, private and academic libraries — as well as many of its museums and think tanks — into one of the world's largest electronic information-sharing networks.

The Library of California is a visionary plan created by a statewide library coalition — led and supported by the California State Library and State Librarian Kevin Starr — that would enable resource sharing, cooperation and collaboration among libraries of all types.

The Environmental Information Project, funded by The Library Services and Technology Act — new federal legislation to promote the innovative uses of technology in the nation's libraries — is the first attempt to bring both these initiatives together to demonstrate the economic and intellectual benefits of collaboration.

Organizers hope to explore the technological, organizational and financial issues involved in converting print materials to digitized form and delivering the electronic content from UC's libraries to libraries in the Library of California network.

The first step in the project will be the creation and licensing of an environmental database. The database will be used by public libraries selected as demonstration sites. UC is already digitizing the environmental information held in its special collections and government documents and programmers will create a website to serve as home page for the project and to link it to other existing websites devoted to environmental issues.

The website is expected to be running by the end of this summer at about 30 demonstration sites in Northern, Central and Southern California.

Water conservation still important

Facilities Management, sponsors of the Water and Energy Awareness Campaign, remind people to conserve water despite the downpours brought by El Niño.

Experts warn that Californians must be prepared for another cycle of drought.

"We live in a place where dry periods are part of a regular weather pattern," says Mary Haake, chair of the water policy committee of the Sierra Club Bay Chapter.

The next drought could mirror the dry weather patterns of 1988-93 or the most severe drought, which occurred from 1976-77, says Jeff Cohen, spokesperson for the California Office of Water Education.

Conserving water has significant long-term effects in regards to water management. It also has critical consequences in the event of a natural disaster or emergency such as an earthquake or fire when water supplies may be depleted rapidly, they say.

With a campus exceeding 20,000 people, Dave Bohler of Facilities Management says that UCSF uses more than 300 million gallons of water each year. "We can help conserve water by making sure water faucets are turned off and reporting water leaks to the building manager."

Report cites need for federally funded physician assistant training

A new report by health policy experts says that federal funds should be used for the clinical training of physician assistants, who working under the supervision of physicians, will be increasingly valued by the managed care system for their ability to provide cost-effective primary care.

These funds should be paid directly to the clinical service site providing training and not to the educational programs that are responsible for organizing and conducting education the report says.

"In addition, existing funding should be used to attract, recruit, and retain individuals from underserved rural and urban areas and to increase minority representation within the profession," says Edward O'Neil, director of the Center for the Health Professions and executive director of the Pew Health Professions Commission.

The report, entitled "Charting a Course for the 21st Century: Physician Assistants and Managed Care," examines the roles of physician assistants (PAs) in the managed health care environment and extends many of the recommendations made in the Pew Commission's 1995 report, which called for the radical reduction in the health care workforce as a response to the changing health care system.

The PA profession was created in the 1960s during a time of physician shortages. Today "PAs are a vital component to the health care delivery system under managed care," says O'Neil. "The Pew Health Professions Commission and the UCSF Center for the Health Professions felt it was important to address the changing educational and practice environment for PAs, and to encourage educators and policy makers to create a flexible and responsive workforce that could help meet the health care needs of this nation."

The report further addresses the increased competition, particularly in urban areas, amongst nurse practitioners, physicians, and physician assistants.

The report also includes the following recommendations:

- To guard against oversupply, educational programs for PAs or any other health profession should not be expanded without an analysis of long- and short-term market conditions.
- Physician assistant education and training should include concepts in population-based care, accountability, use and importance of information and demonstrable outcomes, interdependence among the health and human services professions, linkages between health care delivery and finance, and general emphasis on primary care. These elements should be added to existing course and clinical work, but should not lengthen PA education and training.
- All medical residency programs should encourage team practice and include the opportunity to work with physician assistants.

The Pew Health Professions Commission is a national initiative for changing the health care workforce, and is administered through the Center for the Health Professions at UCSF. The center seeks to assist health care professionals, health professional schools, health care delivery organizations and public policy makers in responding to the challenges of educating and managing a health care workforce capable of improving the health and well-being of people and their communities.

— Lordelyn Del Rosario

China (from page 1)

providing pictures and information that will help us in organizing diagnoses. We will learn from them as well and share our patients' stories with them."

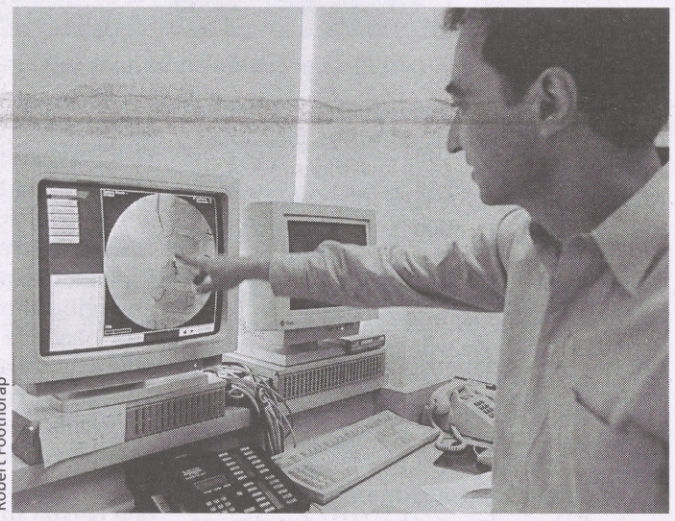
The event highlighted the potential of this form of communication, which is expected to be used on an ongoing basis for future medical consultations between US and Chinese doctors.

"Until now, collaborations between physicians on individual cases were limited to exchanging information via email, phone and fax," says Peter Van Etten, president and chief executive officer of UCSF Stanford Health Care. "With this demonstration, we are opening a new avenue of cooperation and service. Today's event demonstrates the potential of this new communications technology to improve patient care in both countries."

The physicians were able to communicate through relatively simple technological components, such as digitized video images, two-way, live interactive audio, a shared whiteboard, and email. This kind of technology is far more accessible in a developing country like China and far less expensive than a live, state-of-the-art teleconferencing system, says John Reuling, director of medNet, the team of networking and Web specialists at Stanford Medical Center who helped coordinate the link-up.

"It demonstrates that you can rely on the Internet as it exists today in China to do real medical consultations," Reuling says. "It also demonstrates that there are benefits to using unglamorous things, like email or nighttime transfers of information, and combining those with some of the emerging technologies, such as two-way video over the Internet, to come up with a very potent package that's much better than the individual parts."

In the future, he says, doctors outside the United States could obtain information about patients, including any medical images that might be available in digital format, then transfer the information at night when Internet traffic is quiet. Doctors here could then retrieve the information, review it and schedule a live teleconference to talk about possible diagnoses and treatment.



Robert Foothorap

Teitel at work in the nation's first networked digital cardiac catheterization lab at UCSF.

During the demonstration, two pediatric cardiology specialists, David Teitel of UCSF and Daniel Bernstein of Stanford, reviewed the X-rays of a 12-year-old girl who had been experiencing shortness of breath, fatigue and abnormal heart rhythms. Doctors in Xian, where the girl was hospitalized, had tentatively diagnosed her with viral myocarditis, an inflammation of the heart muscle. But on viewing the X-rays, Teitel and Bernstein said it appeared the girl might be suffering from pericarditis, an inflammation of the heart lining — a less serious illness that is easier to treat. The two pediatricians suggested to their Chinese colleagues that a nuclear scan and an MRI could help confirm the diagnosis.

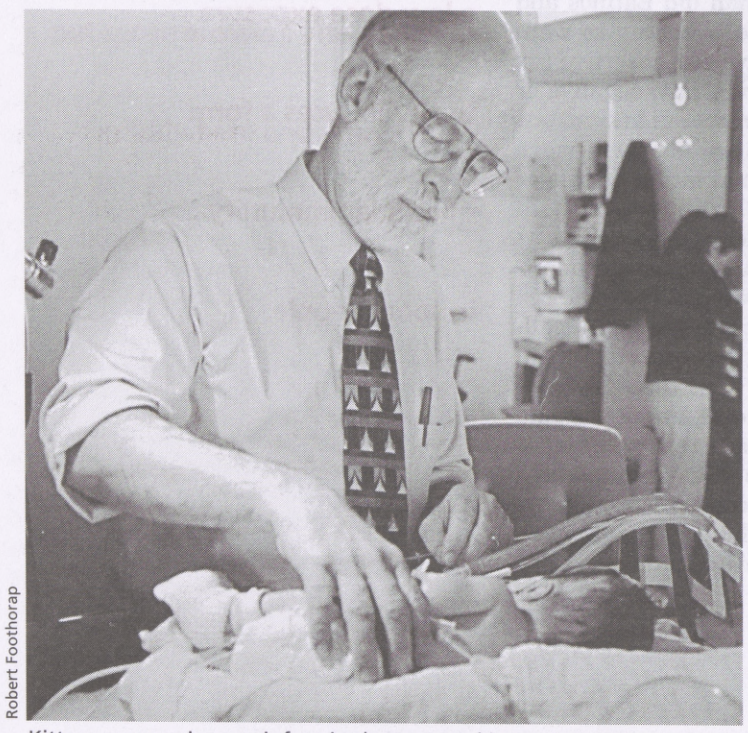
Teitel and Bernstein said they also learned something from their counterparts on the other end of the exchange. The Chinese physicians had been treating the girl with large doses of vitamins C and E and an herbal medicine, all of which have antioxidant properties. Teitel said this approach makes sense and could be less toxic than drugs currently used in this country to treat heart inflammation. Both he and Bernstein asked to remain in touch with the doctors on the girl's progress.

Teitel, a UCSF professor of pediatrics who developed the first digital networked cardiac catheterization lab in the US, said that Internet technology is still evolving and that moving images, such as echocardiograms, still cannot be effectively transmitted on the Web. However, he predicted that this would be possible in a year or so.

"I think it's very clear that patients will gain a tremendous amount by having physicians communicate with each other and see what exactly is going on with each patient," Teitel says. "It's very different when you have only a piece of paper and some information about a patient, but you don't really see how a heart is beating on an echocardiogram or see what their blood vessels or valves look like in an angiogram."

Bernstein, an associate professor of pediatrics, added, "I think telemedicine is the medicine of the future. We already use the Internet to a large degree to communicate with our colleagues and to run difficult cases by each other. I think telemedicine will allow us to do that with videotape, echocardiograms, angiograms and with live patient demonstrations in the future. I think that is the way medicine is moving."

The sponsors of the telemedicine demonstration, in addition to UCSF Stanford Health Care, were: the Bridge to Asia Foundation, a California-based nonprofit organization that supports education and research in developing countries in Asia; Sun Microsystems in Mountain View; the AT&T Foundation; and Xian Medical University.



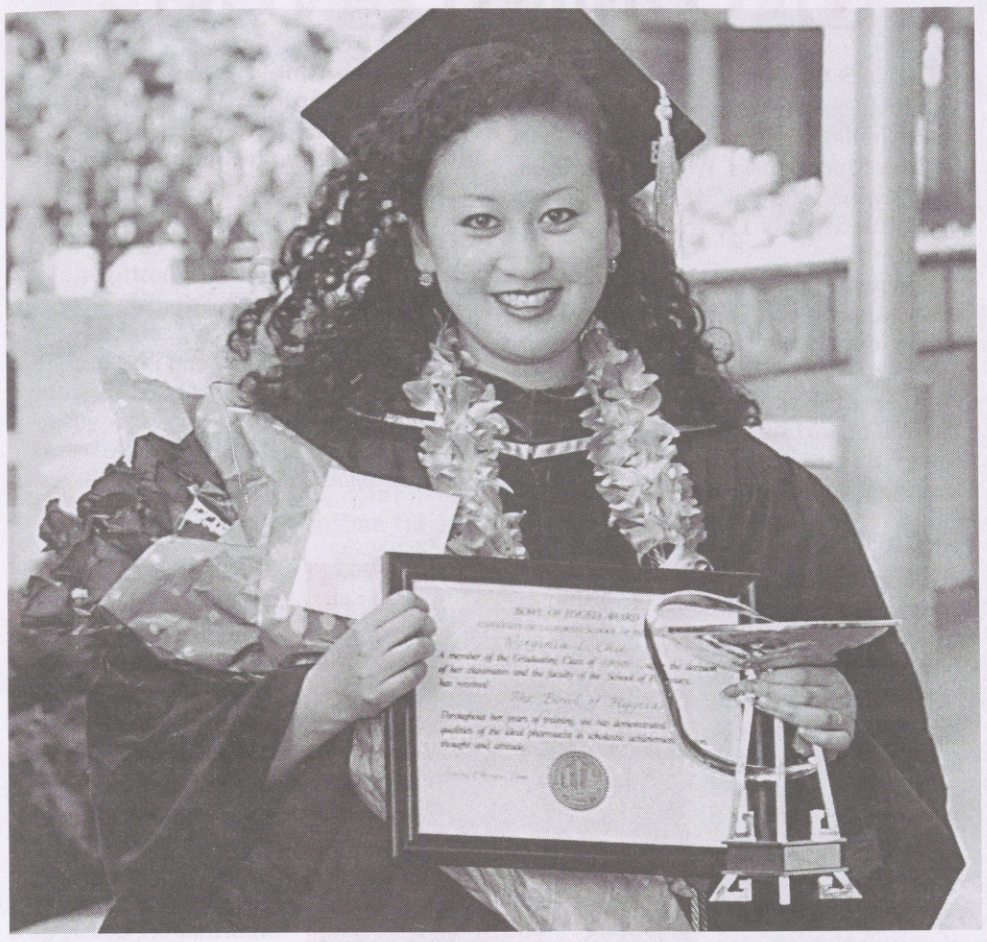
Robert Foothorap

Kitterman examines an infant in the neonatal intensive care nursery at UCSF.

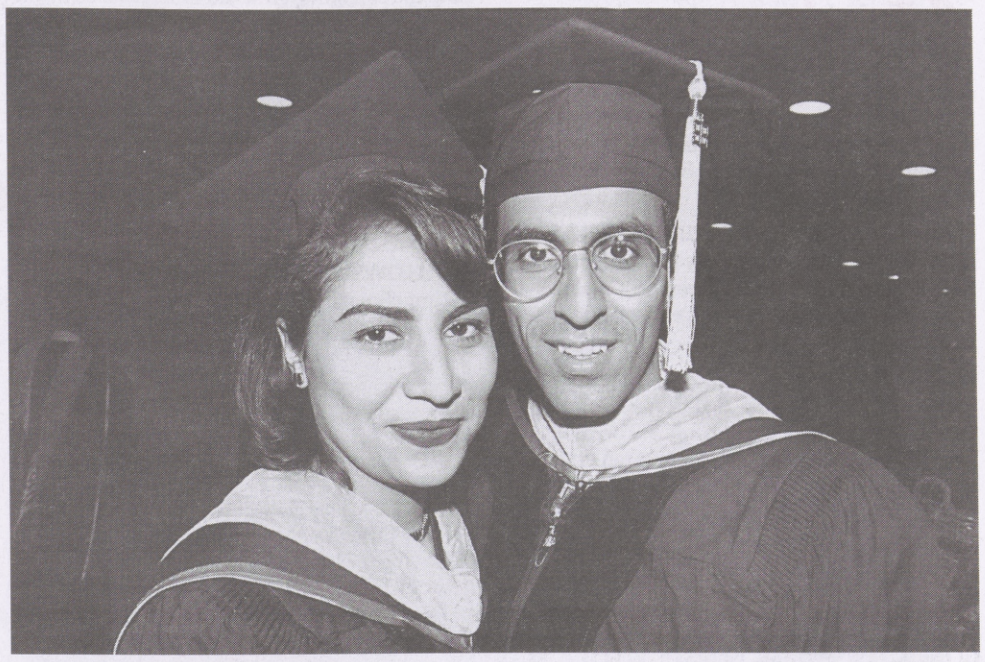
Photos by Chris T. Anderson

Schools of Dentistry and Pharmacy celebrate

commencement 1998



The UCSF School of Pharmacy awarded its top award, the Bowl of Hygeia, to Virginia Chu, a member of the Phi Lambda Sigma Pharmacy Leadership Society.



The UCSF School of Dentistry Class of 1998 was called the "Class of Romance" for the number of couples who courted on campus. Mary Dini and Mohammad Zarrinnger, who met in dental school, are now married.

Charles Bertolami, dean of the School of Dentistry, presents the Elizabeth Fuhriman Gardner Award to dental hygienist Ieneke Marianne Wassenaar.

Photos by Chris T. Anderson

George Kenyon, dean of the School of Pharmacy, hoods Flora Hsu, who received her doctor of pharmacy at the graduation ceremony. Kenyon will depart UCSF at the end of August to take a new post as dean of the University of Michigan School of Pharmacy.

Honors to faculty, staff, graduates

The UCSF schools of Dentistry and Pharmacy held commencement ceremonies on June 20, recognizing the achievements of students, faculty and staff.

The Dental Hygiene program graduated 17, the dental school graduated 78, and Pharmacy bestowed 110 PharmD degrees to its graduates at the celebrations held at the Masonic Auditorium in San Francisco.

David Datwyler, dental graduate, and Ieneke Wassenaar, dental hygiene graduate, were winners of the Elizabeth Fuhriman Gardner Awards, which recognize scholastic achievement, service to the community, leadership qualities, and demonstrated concern for others.

The School of Pharmacy awarded its highest honor — the Bowl of Hygeia award — to Virginia Chu. The award, established in 1966 and sponsored by the UC Pharmacy Alumni Association, is awarded to the senior student who, in the estimation of classmates and instructors, best demonstrates the qualities of an ideal pharmacist in action, thought and attitude. Honorable mentions went to Jennifer Barzee, Kimberly Botwin, Julie Fulmer and Doris Lew. Three pharmacy graduates were honored for achieving the highest grade-point average in the graduating class: Scott Chamberland, Doris Lew and Suzanne Smalanscuss.

The Long Foundation teaching awards went to Sexton Sutherland in the department of anatomy for basic science; Steve Kayser received the clinical teaching prize and Peter Ambrose received the mentor prize.

Two staff members were recognized for their devotion to students over the years: Mike Lemont, director of student affairs, who will be retiring in January 1999 after 20 years of service to UCSF and Barbara Wilson, an analyst in the dean's office, who has worked at UCSF for more than 30 years.

MEDICAL CALL BOARD

Allergic asthma

Researchers in the Division of Allergy/Immunology are conducting a study to evaluate a novel therapy for the treatment of allergic asthma. This new therapeutic approach involves the injection of a protein called E25 or anti-IgE antibody under the skin with the intention of blocking allergic reactions to environmental allergens such as house dust, animal dander and cockroach allergen.

This study is designed to evaluate E25's efficacy in reducing asthma symptoms, reducing required amounts of inhaled steroid medication, and improving lung function in patients with allergic asthma. Participants must be between the ages of 12 and 75, be diagnosed with allergic asthma, and require daily treatment with an inhaled corticosteroid medication. For more information, please call Kevin Haskell at 476-5648.

Balance and posture

The UCSF/SFGH Orthopaedic Biomechanics Laboratory is seeking men and women 70 years and older for a study investigating balance and posture. Participants must be able to stand independently and walk a distance of 15 feet. They should not have a history of neurological disease, such as stroke or Parkinson's disease; amputations; or severe arthritis. Participants also must not be taking tranquilizers, antidepressants, antiarrhythmics, or high blood pressure medications and must be able to read and understand English. The study consists of two sessions of about three hours each. Participants will be paid $10 per hour. Test sessions will be conducted at SFGH. Interested individuals should call Liz Hsiao at 206-6865.

DHEA and men

UCSF doctors are looking for healthy males between the ages of 56-85 for a 14-month study to test the effects of DHEA. Participants will take DHEA for six of the months.

Eligible participants should speak English as their first language; have not had a stroke or heart attack or cancer; have no serious depression; and must not be using hormones, such as steroids or hormone-containing creams. For more information, call 476-7840, ext. 2.

Osteoporosis

UCSF's Prevention Sciences Group seeks healthy women who are between one and ten years past menopause and who are not taking estrogen for an eight-week nutrition study to determine whether the amount of salt a person eats in their food can affect their bones. Participants will be paid.

For more information, call Deborah Sellmeyer at 597-4982.

July 4–July 17, 1998

7 Tuesday

MEDITATION CLASS: Raj Yoga medication classes are held every Tuesday, noon-1 p.m., S 160. Free. Sponsored by the Institute of Healing Arts and Sciences and the Brahma Kumari Meditation Center. For more information, call 563-4459.

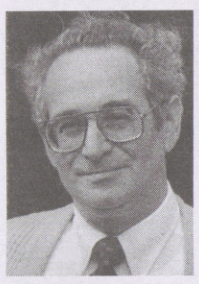
CLINICAL CANCER CENTER GROUNDBREAKING: The campus community is invited to attend the groundbreaking ceremony, 4 p.m., UCSF/Mount Zion Medical Center, 1600 Divisadero St.

FIRST AID/ADULT CPR: Outdoors Unlimited is presenting an eight-hour Red Cross certified course, 6-10 p.m., today and July 9. The course gives participants the basics in first aid and adult CPR. For more information, call 476-2078.

8 Wednesday

GI FELLOWS' COURSE: Kenneth McQuaid, associate clinical professor, GI division, VAMC, presents *Overview of the Revised Fellows' Course,* 8-9 a.m., S 214.

GI GRAND ROUNDS: Marvin Sleisenger, professor emeritus, GI division, presents *50 Years of Gastroenterology at UCSF,* 9-10 a.m., S 214.



Glantz

BROWN BAG LECTURE: Stanton A. Glantz, professor of medicine, cardiology, presents *Tobacco Wars,* 12:10 p.m., HSW 300. Glantz will give an update on the current status of California and national legislation. Sponsored by Public Service Programs. For more information, call 476-4394.

WINE APPRECIATION: Millberry Programs & Services presents *Fine Wine Appreciation,* 7-9 p.m. Expand your appreciation and knowledge of fine wines. This class will teach you about wine making and how to distinguish the different varietals. Sessions run through Aug. 26. For more information, call 476-1115.

9 Thursday

GRAND ROUNDS LECTURE: Elyse Foster, associate professor, clinical medicine & anesthesia and director, echocardiography laboratory, presents *Approach to the Patient with Surgically Corrected Congenital Heart Disease,* noon-1 p.m., N 225.

13 Monday

FOR YOUR EYES ONLY: Douglas Holsclaw, assistant professor, ophthalmology, presents *Better Vision Now,* 6 p.m., UCSF Beckman Vision Center, 8 Kirkham St. Learn new surgery options for the correction of nearsightedness and astigmatism, from laser surgery to corneal implants. Free. Call 476-5021.

14 Tuesday

MEDITATION CLASS: See July 7 listing.

NUTRITION WORKSHOP: Millberry Programs & Services presents *How to be a Better Fat Burner,* 5:30-6:15 p.m., MU Fitness Center. Find out how to boost your metabolism and increase your energy. To register, call 476-1115.

WILDERNESS FIRST AID: Outdoors Unlimited will present a 20-hour introduction course on how to respond to first aid emergencies in the wilderness. Red Cross Standard First Aid and Adult CPR certification available upon completion of this course. Cost: $56/72/80 ($40 for current OU). To sign up, call 476-2078.

15 Wednesday

GI FELLOWS' COURSE: Jonathan Terdiman, assistant clinical professor, GI division, VAMC, presents *Evaluation and Treatment of the Patient with GI Bleeding* – pt. 1, 8-9 a.m., S 214.

GI GRAND ROUNDS: John O'Brien, associate professor of medicine, Indiana University Medical Center, presents *Liver Manifestations of Inflammatory Bowel Disease,* 9-10 a.m., S 214.

BROWN BAG LECTURE: Susan Christy, leadership/teambuilding consultant/trainer, presents *Keeping Yourself Healthy in a Hectic Work Environment,* 12:10 p.m., HSW 300. The work is too much, the expectations are unrealistic, the people at work are difficult. Hear some strategies for maintaining your perspective, productivity and sanity. Sponsored by Public Service Programs. For more information, call 476-4394.

SUMMER OF FITNESS: Lee Blackmore, chef, presents *Nutrition and HIV,* 1-3 p.m., 400 Parnassus Ave., room 455. Sponsored by the Women's & Children's Specialty Program, this is an event for women and children living with HIV to learn about health and fitness. Event features food, transportation, child care and door prizes. For more information, contact Claire Siverson at 476-2417.

16 Thursday

BOARD OF REGENTS MEETING LAUREL HEIGHTS

SEXUAL HARASSMENT PREVENTION: The Office of Sexual Harassment Prevention and Resolution will conduct briefings for managers, 10 a.m.-noon, S 168, on how to handle sexual harassment issues from the perspective of the manager's role. A second session will be offered Sept. 15, from 10 a.m.-noon (room to be announced). Seating is limited, so please reserve your place by calling Charleane Williams at 476-5186 or visit the website at www.oshpr.ucsf.edu.

RAFFLE KICKOFF PARTY: EMPACT! kicks off their 10th annual raffle party, 11:30 a.m.-1:30 p.m., MU I-Level. Want to sell raffle tickets? Come to the party — great food and live music. Top raffle ticket seller will win a state-of-the-art Dell Pentium II Multimedia Enhanced PC, donated by The Source and Dell Computers. Free and fun. For more information, call 476-2675.

BROWN BAG LECTURE: Richard Avanzino, president, SPCA, presents *The Rightful Place of Pets in Society,* 12:10-1 p.m., Mission Center, Board Rm., 6th Floor. Hear a discussion on the changing status of pets in society and what this shift in values mean legally, socially and economically. Sponsored by Public Service Programs. For more information, call 476-4394.

GRAND ROUNDS LECTURE: George F. Sawaya, assistant professor, obstetrics, gynecology & reproductive services, department of epidemiology and biostatistics, presents *Updates in Medicine Series: Update on Obstetrics and Gynecology*, noon-1 p.m., N 225.

17 Friday

BOARD OF REGENTS MEETING LAUREL HEIGHTS

FOR DAILY NEWS GO TO
UCSF UCSF'S ELECTRONIC DAILY daybreak
www.ucsf.edu/daybreak

UPCOMING EVENTS

Choices of menopause

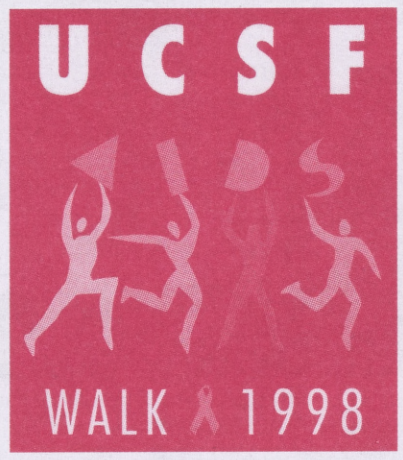
UCSF is hosting a conference titled, the "Challenges, Choices and Concerns for the Menopausal Woman: Optimizing Pharmacotherapy" at Laurel Heights on Saturday, July 11, from 7:30 a.m. to 4 p.m.

Designed for health care practitioners, the program is presented by the UCSF department of clinical pharmacy; School of Pharmacy; National Center of Excellence in Women's Health; department of obstetrics, gynecology and reproductive sciences; and the School of Medicine.

Register for AIDS Walk

UCSF and UCSF Stanford Health Care employees are encouraged to participate in the San Francisco AIDS Walk slated for Sunday, July 19.

For the latest on AIDS research, see pages 4 and 5. For more information on UCSF and UCSF Stanford's participation, call Martha Geraty at 476-4394. For general information about the walk, call 392-WALK or visit the website at (http://www.bonsai.com/aidswalksf/).



Chili and salsa tasting

Chili and salsa lovers should mark their calendars for the Seventh Annual Chili & Salsa Cookoff slated for Wednesday, Aug. 12, from 11:30 a.m. to 1 p.m., in the Millberry Gym. To enter the contest, fill out an entry form located on the EMPACT! website at (www.empact.ucsf.edu).

Getaway to Waterworld

UCSF and UCSF Stanford Health Care employees can escape the heat at family fun day planned at Waterworld USA on Saturday, Sept. 26, from 11 a.m. to 5 p.m. at the amusement park in Concord. For discounted ticket information, call EMPACT! at 476-2675.

Cancer (from page 1)

the center additional resources to fund all aspects of translational research.

Already the UCSF Cancer Center has received over $25 million in NCI grants. In fiscal year 1997, UCSF ranked sixth among all US institutions in research support from the NCI.

"This new building will enable us to deliver comprehensive care and cutting edge treatments that are unique in the Bay Area by bringing together the scientific community with clinicians," says Bruce Schroffel, chief operating officer of the UCSF Medical Center.

The UCSF Carol Franc Buck Breast Care Center, located in the UCSF clinical cancer building at UCSF/Mount Zion, has experienced the greatest growth of all the oncology programs over the past three years. To meet patient demands, the center will occupy a full floor in the new outpatient building that will have a "home-like," rather than typical doctor's office, atmosphere.

"In the last four years our patient volume has more than tripled," says Laura Esserman, director of the UCSF Carol Franc Buck Breast Care Center. "We are looking forward to the new building where our program will have enough room to support our growth. Currently we have six exam rooms, in the new building we will have 14, which will be shared with the Cancer Risk program."

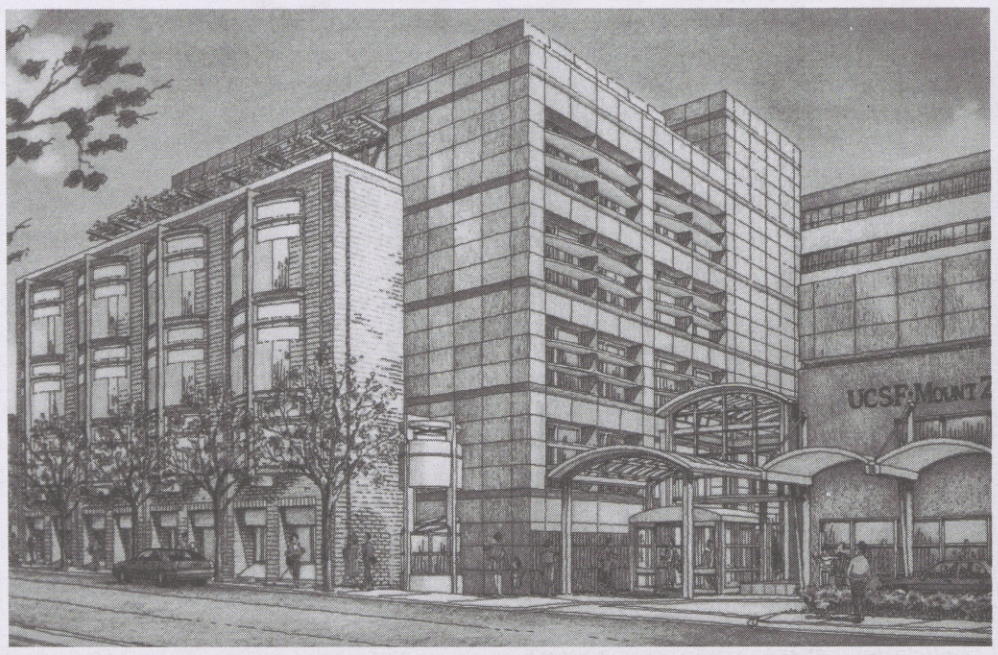
She added that two new full-time breast cancer surgeons will join the Breast Care Center this fall. In addition, the UCSF urological oncology program, which is growing at a similar rate as the breast program, has recruited four additional urologists.

UCSF has been a progressive force in cancer science for the past 50 years and continues to build upon its long history of excellence in cancer research. In the mid-1970s, J. Michael Bishop, UCSF's new chancellor, and Harold Varmus, discovered the cancer-causing genes called oncogenes. In 1989, they received a Nobel Prize for their work.

Marc Shuman, UCSF chief of hematology/oncology, associate director of the Cancer Research Institute, who started his career at UCSF in 1976, marvels at the evolution of cancer research and treatment he has witnessed at UCSF during the last two decades.

"When I first came to UCSF, there was one full-time oncologist! There are at least ten now working for the UCSF Cancer Center," Shuman says. "In addition, most scientists working in basic research were not interested in cancer as a disease and gene therapy was inconceivable in 1976. Over the last five years this has changed dramatically."

Currently 275 faculty members are dedicated to treating and researching cancer at UCSF.



An architect's rendering of the clinical cancer center.